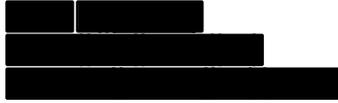




STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION

MPA/167689

PRELIMINARY RECITALS

Pursuant to a petition filed July 30, 2015, under Wis. Stat., §49.45(5), to review a decision by the Division of Health Care Access and Accountability (DHCAA) to deny a Medical Assistance (MA) authorization request for Harvoni, a hearing was held on September 17, 2015, by telephone.

The issue for determination is whether petitioner met the criteria for authorization for Harvoni.

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: Written submission of Lynn Radmer, R.Ph.

ADMINISTRATIVE LAW JUDGE:

Brian C. Schneider
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES # [redacted]) is a resident of Richland County.
2. Gunderson Clinic Pharmacy requested authorization for Harvoni for petitioner on June 18, 2015, PA no. [redacted]. The DHCAA denied the request by a letter dated June 15, 2015.
3. Petitioner has Hepatitis C. The authorization request did not include a Metavir score. Petitioner does not have cirrhosis of the liver or extra-hepatic manifestations of the disease.

## DISCUSSION

Drugs that entail substantial cost or utilization problems are subject to prior authorization. Wis. Admin. Code, §DHS 107.10(2)(d). The Department has utilized a preferred drug list since 2004 to inform pharmacies what drugs require authorization. Harvoni is a non-preferred drug that requires authorization because of its high cost. MA providers were informed of the policy regarding drugs such as Harvoni in Forward Health Update no. 2014-74, dated November, 2014 and effective December 1, 2014. The Update is attached to the DHCAA case summary dated August 27, 2015.

Under the policy Harvoni will be considered for approval only if the person's disease has advanced to any of the following stages: compensated cirrhosis, serious extra-hepatic manifestations of the virus, or Metavir Score F3 or greater. There are also a number of circumstances listed which entail automatic denial. The Update finally lists the types of clinical information that the provider may submit to justify the request.

In this case the submission did not provide sufficient justification to approve the drug. There is no mention of cirrhosis or hepatic manifestations, and no Metavir Score was provided.

Petitioner noted that the drug appears to be a massive success and the cost should not interfere with saving someone's life. Unfortunately the Division of Hearings and Appeals does not have the authority to ignore the Department's approval criteria. I must conclude that the denial was correct.

## CONCLUSIONS OF LAW

The DHCAA correctly denied the request for Harvoni because it did not show that petitioner's Hepatitis had advanced to the stage for which Harvoni is approved.

**THEREFORE, it is** **ORDERED**

That the petition for review is hereby dismissed.

## **REQUEST FOR A REHEARING**

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

## **APPEAL TO COURT**

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in

this decision as “PARTIES IN INTEREST” **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,  
Wisconsin, this 21st day of September, 2015

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\sBrian C. Schneider  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin \DIVISION OF HEARINGS AND APPEALS**

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The preceding decision was sent to the following parties on September 21, 2015.

Division of Health Care Access and Accountability